

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is construction on Schedule? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If no, is there an update progress schedule? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Can this be revised schedule be met barring unforeseen circumstances?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimate of percentage of construction complete as of date of inspection:

\_\_\_\_\_

Does the percentage of completion conform to the draw request? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Comments: \_\_\_\_\_

Are materials and equipment at the project site being properly stored and protected prior to installation?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Are general safety regulations being followed, i.e., hard-hats on workers and site visitors, site fencing, pedestrian protections, etc.? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Were there any safety deficiencies observed? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Are handicap accessible units and other handicap construction in accordance to UFAS and HUD regulations and /or requirements? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Are lead-based paint and /or asbestos removal and abatement and other site remediation requirements being properly followed (application, worker protection, clean-up, disposal, etc.)? Yes: \_\_\_\_ No: \_\_\_\_ Not Applicable: \_\_\_\_

Have previously noted deficiencies been corrected? Yes: \_\_\_\_ No: \_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Overall work quality: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **III. CONTRACT ADMINISTRATION**

#### **A. Oversight Control:**

1. How often are inspections being performed? (If no inspections are being performed, explain why not): HA \_\_\_\_ A/E \_\_\_\_ Other \_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Is A/E performing inspections as required by his contract and providing timely inspection reports to the HA? Yes \_\_\_\_ No \_\_\_\_ N/A \_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Does HA take appropriate action to ensure quality, progress, and in correcting defects and deficiencies in the contractor's work? Yes: \_\_\_\_ No: \_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Is the HA exercising control over the project? Yes: \_\_\_\_ No: \_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. Quality Control:

1. Is a daily construction report or log, documenting progress, quality assurance, deficiencies, corrective actions taken, change orders, etc. being maintained by HA or AE? Yes \_\_\_\_  
No \_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Are submittals and shop drawings being properly processed (are they adequate and timely)?  
Yes \_\_\_\_ No \_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Is HA keeping plans, specifications, change orders, shop drawings, pay estimates, etc. in an orderly fashion and up-to-date? Yes \_\_\_\_\_ No \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Are the change orders properly executed and that the scope and cost is appropriate and within the contract amount and available funding resources?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Are tests for materials and equipment being conducted according to the specifications, done in a timely fashion, noted in logs and reports, and kept up to date?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Does the contractor provide adequate supervision and direction of the work?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Contractor keeps work site relatively clean and free of excess debris during construction and, performs a satisfactory cleanup at the end of the job? Yes \_\_\_\_\_ No \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Are As-Built drawings being maintained? Yes \_\_\_\_\_ No \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

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C. Miscellaneous:

1. Is there any Force Account Work being performed? Yes \_\_\_\_\_ No \_\_\_\_\_
  2. If yes, are labor, materials, and equipment usage being properly documented and, the work of satisfactory quality? Yes: \_\_\_\_\_ No: \_\_\_\_\_
- 

Comments:

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#### **IV. RECOMMENDATIONS AND COMMENTS**

#### **V. ATTACHMENTS**

#### **VI. THE RESULTS OF THIS INSPECTION WERE DISCUSSED WITH THE FOLLOWING PERSON(S) ON THE DATES INDICATED:**

Name

Date

HA Representative(s):

HUD Field Personnel:

HUD Headquarters Personnel:

Others:

COE Rep Signature: \_\_\_\_\_

Printed Name & Title:

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